



**Annual Survey**  
**Gross Receipts Report**  
**Commercial Use Authorization**  
*(formerly Incidental Business Permit)*

YEAR: \_\_\_\_\_

**Due Date: Must be postmarked by November 15<sup>th</sup>**

**Business Name:** \_\_\_\_\_

**1. Please check (✓) services you provided to your clients/park visitors:**

<input type="checkbox"/> Air Taxi	<input type="checkbox"/> Horse Packing
<input type="checkbox"/> Big Game Transporter	<input type="checkbox"/> Horse Rides
<input type="checkbox"/> Incidental) Big Game Transporter	<input type="checkbox"/> Shuttle & Taxi Service
<input type="checkbox"/> Backpacking / Camping Overnight	<input type="checkbox"/> Vehicle Tours
<input type="checkbox"/> Bear Viewing	<input type="checkbox"/> Wagon Rides
<input type="checkbox"/> Camping (Groups)	<input type="checkbox"/> Boating Trips
<input type="checkbox"/> Hiking / Walking Tours	<input type="checkbox"/> Charter Boat
<input type="checkbox"/> Mountaineering	<input type="checkbox"/> Kayak Tours
<input type="checkbox"/> Photography	<input type="checkbox"/> Sportfishing
<input type="checkbox"/> Bicycle Tours	<input type="checkbox"/> Winter Backcountry Trips
	(Skiing _____ Dog Sledding _____,
	Snowshoeing _____)
	<input type="checkbox"/> Other: _____

2. This form is required of "Out-of-Park" Commercial Use Authorization Holders engaging in the incidental use of park area resources. "Incidental Use" means all services provided under an Out-of-Park CUA must (A) originate and terminate outside of the park area (or within an inholding) and (B) involve no solicitation of customers, sales, or payment for commercial services while on parklands. Were your trips provided in accordance with items "A" and "B" above? Yes \_\_\_\_\_ No \_\_\_\_\_  
(If "No", please explain): \_\_\_\_\_
3. What percentage of your service occurred within park boundaries? \_\_\_\_\_%  
(Example: Pete's Guide Service provided a 10-day guided backpacking tour. Of those 10 days, he spent 1 one day within the park boundaries and the other 9 days elsewhere (outside of park boundaries). Thus, the one day of service in the park accounts for 10% and the other nine days spent outside of the park boundary equals 90%.

-Continued on reverse-

**Business Name:** \_\_\_\_\_ **Year** \_\_\_\_\_

4. Please use the table below to show the amount grossed per park. If you were authorized use of a park unit but did not operate in that park, please show zero (0) in the Annual Gross Receipt column and check the box to the right.

<b>Park Unit</b>	<b>Annual Gross Receipt</b>	<b>Authorized for this park but Did Not Operate <input type="checkbox"/></b>
Alagnak Wild River	\$	
Aniakchak National Monument & Preserve	\$	
Bering Land Bridge National Preserve	\$	
Cape Krusenstern National Monument	\$	
Denali National Park & Preserve	\$	
Gates of the Arctic National Park & Preserve	\$	
Glacier Bay National Park & Preserve	\$	
Katmai National Park & Preserve	\$	
Kenai Fjords National Park	\$	
Klondike Gold Rush National Historical Park	\$	
Kobuk Valley National Park	\$	
Lake Clark National Park & Preserve	\$	
Noatak National Preserve	\$	
Sitka National Historical Park	\$	
Wrangell-St. Elias National Park & Preserve	\$	
Yukon-Charley Rivers National Preserve	\$	
<b>TOTAL</b>	<b>\$</b>	

5. What method(s) of calculation did you use to estimate the annual gross receipts in number 4? (Example: Rate x number of guests x number of days.)

\_\_\_\_\_

6. If you did not operate, please specify contributing factors, if any, such as weather, cost of insurance, cancellations, etc that you can identify as reasons you did not operate.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

TITLE: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_

Thank you for providing this information. This form can be faxed to 907-644-3813 or mailed to:

National Park Service  
Concessions Office  
240 West 5<sup>th</sup> Avenue #114  
Anchorage, AK 99501